Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless if displays a valid OMB control number.

DECLARATION (37 CFR 1.63) FOR UTILITY OR DESIGN APPLICATION USING AN

APPLICATION DATA SHEET (37 CFR 1.76) PC25024A As the below named inventor(s), I/we declare that: This declaration is directed to: X The attached application, or Application No. _____, filed on _____ as amended on ____ (if applicable); I/we believe that I/we am/are the original and first inventor(s) of the subject matter which is claimed and for which a patent is sought; I/we have reviewed and understand the contents of the above-identified application, including the claims, as amended by any amendment specifically referred to above; I/we acknowledge the duty to disclose to the United States Patent and Trademark Office all information known to me/us to be material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT International filing date of the continuation-in-part application. All statements made herein of my/own knowledge are true, all statements made herein on information and belief are believed to be true, and further that these statements were made with the knowledge that willful false statements and the like are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001, and may jeopardize the validity of the application or any patent issuing thereon. Full Name of Inventor(s) Inventor 1 Timothy D. Gryseels US Citizen of Signature Inventor 2 John E. Hambor Signature Citizen of Inventor 3 Steven J. Hawrylik US Citizen of Signature Inventor 4 Marsh L. Roach US Signature Citizen of Additional inventors are being named on

This collection of information is required by 35 U.S.C. 115 and 37 CFR 1.63. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 1 minute to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

To be assigned

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

Application Number

		Filing Da	ite	·	Concurrently Her with				
POWER OF	First Nar	First Named Inventor		Timothy D. Gryseels					
an CORRESPONDE	Title			SUSPENSION METHOD FOR PRODUCING EMBRYOID BODIES, COMPOSITIONS AND METHODS RELATED THERETO					
INDICATION	Art Unit			To be assigned					
INDICATIO	Examine	Examiner Name		To be assigned					
	Attorney	Attorney Docket Number		PC25024A					
I hereby appoint:									
Practitioners at Custon OR	2852	23			į.				
Practitioners named be	elow:								
Name			Registration Number						
		THE THE STATE OF T							
			· ·						
as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.									
Please recognize or change the correspondence address for the above-identified application to:									
The above-mentioned Customer Number.									
OR									
The address associated with Customer Number									
OR									
Firm or Individual Name						"			
Address				·					
Address									
City		s	tate		Zip				
Country .		<u> </u>	L						
Telephone		Fa	ıx T						
I am the:	<u> </u>	I	1						
Applicant/Inventor.									
Assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).									
SIGNATURE of Applicant or Assignee of Record									
Name	ame John E. Hambor								
Signature	Selvatore								
Date	U 10/31/03								
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.									
☑ *Total of 4 forms are submitted.									

This collection of information is required by 37 CFR 1.31 and 1.33. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 3 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

Approved for use through 11/30/2005. OMB 0651-0035
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

To be assigned

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. Applicati n Number

		Filing Date			Concurrently Herewith				
POWER OF ATTORNEY and CORRESPONDENCE ADDRESS INDICATION FORM			med Inven	tor	Timothy D. Gryseels				
			-		SUSPENSION METHOD FOR PRODUCING EMBRYOID BODIES, COMPOSITIONS AND METHODS RELATED THERETO				
					To be assigned				
			Examiner Name		To be assigned				
			Attorney Docket Number		PC25024A				
I hereby appoint:									
Practitioners at Customer Number 28523									
OR									
Practitioners named below:									
LJ	Name	<u> </u>	Registrati	on Number	7				
						-			
				-					
as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all									
business in the United States Patent and Trademark Office connected therewith.									
Please recognize or change the correspondence address for the above-identified application to:									
The above-mentioned Customer Number.									
OR									
The address associated with Customer Number									
OR									
Firm or Individual Name									
Address	· · · · · · · · · · · · · · · · · · ·			-					
Address									
City		s	tate		Zip				
Country			. <u>.</u>		<u> </u>				
Telephone		Fa	×	**.					
I am the:									
Applicant/Inventor.									
Assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).									
SIGNATURE of Applicant or Assignee of Record									
Name	Name Timothy D. Gryseels								
Signature Zinty D. March									
Date 10/89/03									
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.									
⊠ *Total of 4 forms are submitted									

This collection of information is required by 37 CFR 1.31 and 1.33. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 3 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. **Application Number** be assigned **Filing Date Concurrently Herewith First Named Inventor** Tim thy D. Gryseels POWER OF ATTORNEY Title SUSPENSION METHOD FOR PRODUCING and **EMBRYOID BODIES, COMPOSITIONS AND** METHODS RELATED THERETO CORRESPONDENCE ADDRESS **Art Unit** To be assigned INDICATION FORM **Examiner Name** To be assigned **Attorney Docket Number** PC25024A I hereby appoint: Practitioners at Customer Number 28523 \bowtie OR Practitioners named below: Name Registration Number as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith. Please recognize or change the correspondence address for the above-identified application to: The above-mentioned Customer Number. OR The address associated with Customer Number OR Firm or Individual Name Address Address City State Zip Country Fax Telephone I am the: Applicant/Inventor. X Assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96). SIGNATURE of Applicant or Assignee of Record Name Steven J. Hawrylik Signature NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.

This collection of information is required by 37 CFR 1.31 and 1.33. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 3 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

U.S. Patent and Trademark Office, U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. **Application Number** T be assigned **Filing Date Concurrently Herewith** First Named Inventor Timothy D. Gryseels POWER OF ATTORNEY Title SUSPENSION METHOD FOR PRODUCING **EMBRYOID BODIES, COMPOSITIONS AND** METHODS RELATED THERETO CORRESPONDENCE ADDRESS Art Unit To be assigned INDICATION FORM **Examiner Name** To be assigned **Attorney Docket Number** PC25024A I hereby appoint: Practitioners at Customer Number 28523 X OR Practitioners named below: Name **Registration Number** as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith. Please recognize or change the correspondence address for the above-identified application to: The above-mentioned Customer Number. OR The address associated with Customer Number OR Firm or Individual Name Address Address City State Zip Country Fax Telephone I am the: Applicant/Inventor. \bowtie Assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96). SIGNATURE of Applicant or Assignee of Record Marsh L. Roach Name Signature Date NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.

This collection of information is required by 37 CFR 1.31 and 1.33. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 3 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

*Total of 4 forms are submitted.